Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	
	C C00530766
Check if X 24-hour report 48-hour report New report Amends report filed	I on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Cynthia J Christmas	M M / D D / Y Y Y
Mailing Address 1731 Frenchmen St	11 15 2014 Amount
City State Zip Code	60.00
New Orleans LA 70116	Transaction ID: 5a4d6240-e4b8-4c69-a Date of Disbursement or Obligation
Purpose of Expenditure Salary  Category/ Type 001	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought  Disbut 279986.31	ursement For:
Full Name of Payee Cynthia J Christmas	Date of Public Distribution/Dissemination
, <u> </u>	11 15 2014
Mailing Address 1731 Frenchmen St	Amount
City State Zip Code	9.00
New Orleans LA 70116	Transaction ID : 68a41db1-2659-4120-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage  Category/ Type  002	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought  Disb 279986.31	ursement For: Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	69.00
	7 7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Duto	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

Schedule E)	I EXI END	TOTILO		PAGE 2 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	= M / D = D / Y = Y = Y = Y
Full Name of Payee Charleen Ecuyer				of Public Distribution/Dissemination
Mailing Address 3738 Woodland Ridge Blvd			Amou	11 15 2014 nt
City	State	Zip Code		40.00
Baton Rouge	LA	70816		action ID : 192aaf3a-7146-448c-a of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	M	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sough	t: House District:00
Ms. Mary L Landrieu		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	2	279986.31	Disbursemen 2014 O	t For:
Full Name of Payee			Date	of Public Distribution/Dissemination
Charleen Ecuyer			N	11 15 2014
Mailing Address 3738 Woodland Ridge Blvd			Amou	
City	State	Zip Code	— I.	9.00
Baton Rouge	LA	70816		oction ID : 5280d5f1-f324-4f8b-9 of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	N	11 15 / 2014
Name of Federal Candidate		Support	Office Sough	t: House District: 00
Ms. Mary L Landrieu		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7-1-7	279986.31	Disbursemen 2014 C	ther (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditure	9			49.00
(a) CODICIAL OF HOMEZON INDOPERIORIC EXPONENTIAL	J			40.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ures		·· •	
(c) TOTAL Independent Expenditures				7 1 7 1 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
Ms. Emily Buchanan	[Electron	ically Filed] Date	e 11	17
Signature				

Schedule E)	EXI EIID	101120		PAGE 3 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y D Y D Y
Full Name of Payee Vanessa E Ecuyer				f Public Distribution/Dissemination
Mailing Address 3738 Woodland Ridge Blvd			Amour	11 15 2014 ut
City	State	Zip Code		40.00
Baton Rouge	LA	70816		action ID: a2983681-e1eb-42d2-9 f Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	М	11 15 7 2014
Name of Federal Candidate		Support	Office Sought	: House District: 00
Ms. Mary L Landrieu		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	, 2	79986.31	Disbursement 2014 Ot	For: Primary X General her (specify) ▶
Full Name of Payee Chelsey Waite			M	of Public Distribution/Dissemination
Mailing Address 3738 Woodland Ridge Blvd			Amour	
City	State	Zip Code		40.00
Baton Rouge	LA	70816		ction ID : 2a24a5af-5f94-4efa-a of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 15 / Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought	: House District:00
Ms. Mary L Landrieu		X Oppose	Preside	nt Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	, , ,	279986.31	Disbursement 2014 Ot	For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	s			80.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres			7 7 7 7 7
(c) TOTAL Independent Expenditures			· .	7 7 7
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	e or authorized			
Ms. Emily Buchanan	[Electroni	ically Filed] Date	M M M /	17 2014
Signature				

Schedule E)	II EXI EI	ITOTILO		PAGE 4 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo		M / D D / Y N Y N Y
Full Name of Payee			Date of	of Public Distribution/Dissemination
Beau Autin				11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 345 Auroura Ave			Amou	nt
City	State	Zip Code		25.00
Metairie	LA	70006		action ID : c6a33ff2-31a6-46ef-8 of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	М	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sough	t: House District: 00
Ms. Mary L Landrieu		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought		279986.31	Disbursemen 2014 O	t For:
Full Name of Payee			Date	of Public Distribution/Dissemination
Beau Autin			IV	11 15 / 2014
Mailing Address 345 Auroura Ave			Amou	nt
City	State	Zip Code	— L.	1.29
Metairie	LA	70006		ction ID: 79af88c8-7525-4ba7-b of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	N	11 / 15 / Y Y Y Y Y
Name of Federal Candidate		Support	Office Sough	t: House District: 00
Ms. Mary L Landrieu		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	279986.31	Disbursemen 2014 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditure	es			26.29
			,	7 7 7
(b) SUBTOTAL of Unitemized Independent Expend	itures		•	7 7
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
Ms. Emily Buchanan Signature	[Electron	ically Filed] Date	111	17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Schedule E)	INT EXI END	TIONES		PAGE 5 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Women Speak Out PAC			C	C00530766
Check if 24-hour report 48-hour report	New rep	oort Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee Regina R Mouton			Date of Public	Distribution/Dissemination
Mailing Address 5827 Brighton PI			Amount	15 2014
- City	Otata	7:- 0-1-		20.00
City New Orleans	State LA	Zip Code 70131		20.00 D : e391939d-a0b7-4c66-a rsement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		Oppose	President >	
Calendar Year-To-Date Per Election for Office Sought		279986.31	Disbursement For: 2014 Other (spe	Primary
Full Name of Payee Regina R Mouton			M = M /	Distribution/Dissemination
Mailing Address 5827 Brighton PI			Amount	15 2014
City	State	Zip Code		6.00
New Orleans	LA	70131		: c70f73fd-3f19-412a-a rsement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 /	15 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		Oppose	President >	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	-yy-	279986.31	Disbursement For: 2014 Other (spe	Primary X General
(a) SUBTOTAL of Itemized Independent Expendit	ures		<b>•</b>	26.00
(b) SUBTOTAL of Unitemized Independent Expen	ditures		. •	7
			4	4
(c) TOTAL Independent Expenditures			<b>)</b>	4
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or i	idate or authorized			
Ms. Emily Buchanan Signature	[Electron	nically Filed] Date	11 17 17	2014
Signataro				

Schedule E)	IN EXILIND	ITOTILO		PAGE 6 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Women Speak Out PAC			С	C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee Courtney Goldstein			M = M	lic Distribution/Dissemination
Mailing Address 1809 N Woodlawn			Amount	15 2014
City	State	Zip Code		40.00
Metairie	LA	70001		ID: 513babe1-a143-4d1c-a bursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	M 11	15 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	, , ,	279986.31	Disbursement For: 2014 Other (s	Primary
Full Name of Payee	<del></del>		Date of Pub	olic Distribution/Dissemination
Courtney Goldstein			M M M M 11	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1809 N Woodlawn			Amount	
City	State	Zip Code		6.60
Metairie	LA	70001		ID: b56d3c02-d1bd-4913-a bursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	M 11	15 / 2014
Name of Federal Candidate		Support	Office Sought:	House District:00
Ms. Mary L Landrieu		Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7 7	279986.31	Disbursement For: 2014 Other (	Primary X General
(a) SUBTOTAL of Itemized Independent Expenditu	ıres			46.60
(b) SUBTOTAL of Unitemized Independent Expendent	ditures			
(4) 332 3312 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.				4
(c) TOTAL Independent Expenditures			·	4
Under penalty of perjury I certify that the indepen- with, or at the request or suggestion of, any candi- party committee) any political party committee or it	date or authorized			
Ms. Emily Buchanan Signature	[Electron	ically Filed] Date	11 17	2014
Jigilataio				

Schedule E)	10Em Em E			PAGE 7 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
				<b>G</b> 33333773
Check if 24-hour report 48-hour report	ort New repo	ort Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee Courtney Goldstein				f Public Distribution/Dissemination
				11 15 2014
Mailing Address 1809 N Woodlawn			Amoun	t
City	State	Zip Code	-11:	40.00
Metairie	LA	70001		ction ID: 767113c3-d491-4b2a-a f Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	М	11 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought	: House District:00
Ms. Mary L Landrieu		X Oppose	Preside	nt Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	2	279986.31	Disbursement 2014 Ott	For: Primary X General
Full Name of Payee			<u> </u>	f Public Distribution/Dissemination
Courtney Goldstein				11 15 2014
Mailing Address 1809 N Woodlawn			Amour	
			Funda	
City	State LA	Zip Code	Transac	6.60 ction ID : 54e6522d-95cd-48b4-9
Metairie  Purpose of Expanditure		70001		f Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 / 15 / 2014
Name of Federal Candidate		Support	Office Sought	
Ms. Mary L Landrieu		Oppose	Preside	nt Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		279986.31	Disbursement 2014 Ot	For: Primary X General her (specify) ▶
(a) SUBTOTAL of Itemized Independent Exp	enditures		• •	46.60
(b) SUBTOTAL of Unitemized Independent E	Expenditures			
(c) TOTAL Independent Expenditures				7 7 7
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Ms. Emily Buchanan	[Electron	ically Filed] Date	M M /	17 / Y = Y = Y = Y = Y
Signature				

· · · · · · · · · · · · · · · · ·				FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
Courtney Goldstein			[	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1809 N Woodlawn			Amo	unt
City	State	Zip Code	— Г	40.00
Metairie	LA	70001		saction ID : f4f85f12-b521-4c08-8 of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 15 2014
Name of Federal Candidate		Support	Office Soug	ht: House District: 00
Ms. Mary L Landrieu		X Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought		279986.31	Disburseme 2014	nt For:
Full Name of Payee Courtney Goldstein			Date	of Public Distribution/Dissemination
Mailing Address 1809 N Woodlawn			Amo	11 15 2014 unt
City	State	Zip Code		6.60
Metairie	LA	70001		action ID: d9b8759d-cf2a-4f8d-8 of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	] [	11 15 2014
Name of Federal Candidate		Support	Office Soug	ht: House District: 00
Ms. Mary L Landrieu		Oppose	Presid	dent State: LA
Calendar Year-To-Date Per Election for Office Sought	7	279986.31	Disburseme 2014	nt For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditu	ıres		· [	46.60
(b) SUBTOTAL of Unitemized Independent Expendent	ditures		· •	4 4 4
(c) TOTAL Independent Expenditures			· •	7 1 7 1 7
Under penalty of perjury I certify that the indepen- with, or at the request or suggestion of, any candi- party committee) any political party committee or it	date or authorized			
Ms. Emily Buchanan	[Electron	nically Filed] Date	e 11	17 2014
Signature				

PAGE

OF

			FOR SE OF FORM 24/48
	OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
VVOI	men Speak Out PAC		C C00530766
Check	if X 24-hour report 48-hour report X New rep	port Amends report file	d on Mam / Dab / Yayayay
	II Name of Payee Christopher Marquess		Date of Public Distribution/Dissemination
	·		11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ma	ailing Address 110 W Pecan St		Amount
Ci	ty State	Zip Code	50.00
	ille Platte LA	70586	Transaction ID : 8de5bd10-64a8-42e7-9 Date of Disbursement or Obligation
	irpose of Expenditure alary	Category/ Type 001	11 / 15 / 2014
Na	ame of Federal Candidate	Support Office	ce Sought: House District: 00
М	s. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	279986.31 Dist	oursement For: Primary X General  Other (specify) ▶
	alling Address 110 W Pecan St		Date of Public Distribution/Dissemination  11
Ci	ty State	Zip Code	34.50
	fille Platte LA	70586	Transaction ID : 43252cca-381c-4d48-b Date of Disbursement or Obligation
	urpose of Expenditure fileage	Category/ Type 002	11 15 2014
Na	ame of Federal Candidate	Support Offi	ce Sought: House District: 00
N	ls. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	279986.31 Dist	bursement For:  Primary  General  Other (specify) ▶
(a)	SUBTOTAL of Itemized Independent Expenditures	·····	84.50
(b)	SUBTOTAL of Unitemized Independent Expenditures	·····	
(c)	TOTAL Independent Expenditures	······································	
with	der penalty of perjury I certify that the independent expenditures a, or at the request or suggestion of, any candidate or authorized ty committee) any political party committee or its agent.		
_	Ms. Emily Buchanan [Electron	nically Filed] Date	11 17 2014
	Oignature		

PAGE

OF

Schedule E)	IN EXIEND	ITOTILO		PAGE 10 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Women Speak Out PAC			С	C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee Sandra C Montalbano			Date of Publi	c Distribution/Dissemination
Mailing Address 4177 Lowerline St			Amount	15 2014
		7: 0 1		05.00
City Slidell	State LA	Zip Code 70461		35.00 ID: 165c9fa8-284c-41a7-8 ursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	Date of Dispe	15 Y 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		Oppose		X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	, , ,	279986.31	Disbursement For: 2014 Other (sp	Primary
Full Name of Payee Sandra C Montalbano				c Distribution/Dissemination
Mailing Address 4177 Lowerline St			11	15 2014
4177 Lowerine St			Amount	
City	State	Zip Code		2.40
Slidell  Purpose of Expenditure	LA	70461		D: 445f8410-2cd5-442e-9 ursement or Obligation
Mileage		Category/ Type 002	11	15 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		X Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	-, -,	279986.31	Disbursement For: 2014 Other (sp	Primary X General pecify) ▶
(a) SUBTOTAL of Itemized Independent Expendi	tures			37.40
(b) SUBTOTAL of Uniternized Independent Exper	nditures			
,,				7 - 7
(c) TOTAL Independent Expenditures			<b>&gt;</b>	1 1 7 1 1 7 1
Under penalty of perjury I certify that the independent, or at the request or suggestion of, any canon party committee) any political party committee or	lidate or authorized			
Ms. Emily Buchanan Signature	[Electron	ically Filed] Date	11 / 17	2014
3. <del>3</del>				

Schedule E)	PAGE 11 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
	0 00000700
Check if 24-hour report 48-hour report New report Amends report	ort filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Hannah J Landry	11 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 N Coolidge	Amount
City State Zip Code	80.00
Gonzales LA 70737	Transaction ID: c0087a35-dbe3-491e-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary  Category/ Type  001	M M / D D / Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 279986.31	Disbursement For:  Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Hannah J Landry	11 15 / Y Y Y Y Y Y Y
Mailing Address 1110 N Coolidge	
	Amount
City State Zip Code	18.00
Gonzales LA 70737	Transaction ID: 02081043-e7b8-4857-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage  Category/ Type  002	11 / 15 / Y 2014
Name of Federal Candidate Support	Office Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 279986.31	Disbursement For:  Primary  General  2014  General
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 98.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	e 11 17 2014
Signature	

Schedule E)	I EXI END	TOTILO		PAGE 12 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Women Speak Out PAC			С	C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date of Pul	blic Distribution/Dissemination
Mary C Lee			11	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1030 N Coolidge Ave			Amount	
City	State	Zip Code		80.00
Gonzales	LA	70737		n ID: 55eae716-d4e3-49e6-8 sbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11	15 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		X Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	, , , 2	279986.31	Disbursement For 2014 Other (	: Primary X General
Full Name of Payee			Date of Pu	blic Distribution/Dissemination
Mary C Lee			11	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1030 N Coolidge Ave			Amount	
City	State	Zip Code		18.00
Gonzales	LA	70737		n ID: 8aa95a25-a189-46f2-9 sbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 11	/ 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	, , ,	279986.31	Disbursement For 2014 Other	:
(a) SUBTOTAL of Itemized Independent Expenditure	es			98.00
				7 7
(b) SUBTOTAL of Unitemized Independent Expendit	tures		· •	7 7
(c) TOTAL Independent Expenditures			· •	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Ms. Emily Buchanan Signature	[Electron	ically Filed] Date	M M / D 17	
- 9				

				FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C00530766
Check if 24-hour report	18-hour report New report	ort Amends repor	t filed on	M / D = D / Y = Y = Y
Full Name of Payee Joneisha Stewart			Date of	Public Distribution/Dissemination
			1	
Mailing Address 2329 Runnyme	de Dr		Amount	
City	State	Zip Code		50.00
Marrero	LA	70072		tion ID: 2555fde9-4cc1-4d28-a Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	M 1	
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		X Oppose	President	t X Senate State: LA
Calendar Year-To-Date Per Election for Office Souç	ht 2	79986.31	Disbursement F 2014 Othe	For: Primary
Full Name of Payee Joneisha Stewart			M	Public Distribution/Dissemination
Mailing Address 2329 Runnyn	nede Dr		1 Amount	
City	State	Zip Code		4.20
Marrero	LA	70072		ion ID: 7649b815-7418-41d5-9 Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	M 1:	M / D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:00
Ms. Mary L Landrieu		X Oppose	Presiden	t X Senate State: LA
Calendar Year-To-Date Per Election for Office Sou	ght	279986.31	Disbursement I 2014 Oth	For: Primary X General er (specify) ▶
(a) SUBTOTAL of Itemized Indep	endent Expenditures		<b>.</b>	54.20
(b) SUBTOTAL of Unitemized Inc.	lependent Expenditures		<b>.</b>	7
(c) TOTAL Independent Expendit	ures		•	4 4 4
	that the independent expenditures ion of, any candidate or authorized y committee or its agent.			
Ms. Emily Buchanan	[Electron	ically Filed] Date	11 / I	17 2014
Signature				

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OF

Schedule E)	NI EXI END	ITORES		PAGE 14 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Women Speak Out PAC			C	C00530766
Check if 24-hour report 48-hour report	X New rep	ort Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public	Distribution/Dissemination
Lesley Lennox			M M /	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2305 Cleary Ave			Amount	
City	State	Zip Code		42.50
Metairie	LA	70001		D: 83c6d374-a19c-4b0f-b rsement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 /	15 / 2014
Name of Federal Candidate		Support	Office Sought:	House District:00
Ms. Mary L Landrieu		X Oppose	President >	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	279986.31	Disbursement For: 2014 Other (spe	Primary
Full Name of Payee			Date of Public	Distribution/Dissemination
Lesley Lennox			11 /	15 / 2014
Mailing Address 2305 Cleary Ave			Amount	
City	State	Zip Code		3.30
Metairie	LA	70001		: 7a185235-4f59-4032-a rsement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 /	15 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	279986.31	Disbursement For: 2014 Other (spe	Primary X General
(a) SUBTOTAL of Itemized Independent Expenditu	ıres			45.80
(,, , , , , , , , , , , , , , , , , , ,			7	45
(b) SUBTOTAL of Unitemized Independent Expendent	ditures		. >	
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the indepen- with, or at the request or suggestion of, any candi- party committee) any political party committee or it	date or authorized			
Ms. Emily Buchanan Signature	[Electron	nically Filed] Date	11 17 17	2014
<del></del>				

· · · · ,		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report	New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	D	Date of Public Distribution/Dissemination
Gary W Fuhrmann		11 15 2014
Mailing Address 9425 Jessica Drive	А	mount
City Sta	ate Zip Code	75.00
Shreveport L		ransaction ID: 4de92ec6-6323-48b9-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 15 2014
Name of Federal Candidate	Support Office S	ought: House District: 00
Ms. Mary L Landrieu	Oppose Pr	resident State: LA
Calendar Year-To-Date Per Election for Office Sought	279986.31 Disburse 2014	ement For:
Full Name of Payee Gary W Fuhrmann  Mailing Address 9425 Jessica Drive		Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	ate Zip Code	20.40
<b>1</b> '	.A 71106 <b>Tr</b> .	ansaction ID : a547c547-4615-433f-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ 002	11 15 / 2014
Name of Federal Candidate	Support Office S	ought: House District: 00
Ms. Mary L Landrieu	Oppose Pr	resident State: LA State:
Calendar Year-To-Date Per Election for Office Sought	279986.31 Disburse 2014	ement For: Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	•	95.40
(b) SUBTOTAL of Unitemized Independent Expenditures		1171171171
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent e with, or at the request or suggestion of, any candidate or party committee) any political party committee or its ager	r authorized committee or agent of either, o	
Ms. Emily Buchanan	[Electronically Filed] Date 11	17 2014
Signature		

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OF

Schedule E)	L/(1 L/(2)			PAGE 16 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour report	NI wan	· Amanda rana		-M / D D / Y - Y - Y
	X New repo	ort Amends repo	ort filed on	
Full Name of Payee Cynthia N Schmit			М	of Public Distribution/Dissemination
Mailing Address 2226 Taft Circle Apt 1			Amour	
City	State	Zip Code	- [	55.00
Winchester	VA	22601		action ID : a85d72d8-863f-4c26-b of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 15 / 2014
Name of Federal Candidate		Support	Office Sought	t: House District: 00
Ms. Mary L Landrieu		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	2	279986.31	Disbursement 2014 Ot	reference : For: Primary
Full Name of Payee Felicia A Jones			Date of	of Public Distribution/Dissemination
Felicia A Jones			M	11 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4106 Martha St			Amou	nt
City	State	Zip Code		80.00
Shreveport	LA	71109		ction ID : f44c2e91-9f9a-406b-9 of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	М	11 15 / 2014
Name of Federal Candidate		Support	Office Sough	t: House District:00
Ms. Mary L Landrieu		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought		279986.31	Disbursemen 2014 O	t For: Primary X General ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				135.00
(4) 652.67.12 5. 1.0.11.252 11.052 11.052				7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Ms. Emily Buchanan	[Electron	nically Filed] Date	11	17 2014
Signature		_		

Schedule E)	IVI EXI END	TIONES		PAGE 17 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	C IDENTIFICATION NUMBER ▼
Women Speak Out PAC			С	C00530766
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	/ D D / Y D Y Y D Y D Y D Y D Y D Y D Y
Full Name of Payee Felicia A Jones			M = M	iblic Distribution/Dissemination
Mailing Address 4106 Martha St			Amount	15 2014
City	State	Zip Code		9.60
Shreveport	LA	71109		on ID : 21f39140-1241-4f55-a sbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	M 1 M	15 2014
Name of Federal Candidate		Support	Office Sought:	House District:00
Ms. Mary L Landrieu		X Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	279986.31	Disbursement For 2014 Other	r:
Full Name of Payee			Date of Pu	ublic Distribution/Dissemination
Janet Morris			M - M	/ D D / Y Y Y Y Y Y Y 15 2014
Mailing Address 620 Old Barbome Rd Lot 2			Amount	
City	State	Zip Code		25.00
West Monroe	LA	71291	Transaction Date of Di	n ID : 5efc9dee-6e26-46f1-9 sbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11	15 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		X Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7 7	279986.31	Disbursement For 2014 Other	r: Primary X General (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditu	ıres		•	34.60
(b) SUBTOTAL of Unitemized Independent Expendent	ditures		•	
(c) TOTAL Independent Expenditures			·	7 1 7 1 7 1
Under penalty of perjury I certify that the indepen with, or at the request or suggestion of, any candi party committee) any political party committee or it	date or authorize			
Ms. Emily Buchanan	[Electron	nically Filed] Date	e 11 1	
Signature				

Schedule E)	PAGE 18 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
	M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report New report Amends report	t filed on
Full Name of Payee Elvis Spears	Date of Public Distribution/Dissemination
Mailing Address 2150 Hope St	11 15 / 2014
Maining Address 2150 Hope St	Amount
City State Zip Code	60.00
New Orleans LA 70119	Transaction ID: e90a21b3-eb35-4d8f-a Date of Disbursement or Obligation
Purpose of Expenditure Salary  Category/ Type  001	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought 279986.31	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Elvis Spears	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2150 Hope St	Amount
City State Zip Code	9.00
New Orleans LA 70119	Transaction ID : ae300e1b-8ca8-4b43-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage  Category/ Type  002	11 15 / 2014
Name of Federal Candidate Support	Office Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 279986.31	Disbursement For:  Primary  General   2014
Charles Charles Undersales Empaditions	20.00
(a) SUBTOTAL of Itemized Independent Expenditures	69.00
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>&gt;</b>
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were rewith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

Sch	nedule E)	1101120		PAGE 19 OF 30 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)		F	FEC IDENTIFICATION NUMBER ▼
W	omen Speak Out PAC			C C00530766
Che	ck if 🔀 24-hour report 🗌 48-hour report 🔀 New rep	port Amends repo	ort filed on	M / D D / Y Y Y Y Y
Т	Full Name of Payee		Date of	Public Distribution/Dissemination
	Gregory Green		M	11 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2506 Bolch Street		Amount	i
	City State	Zip Code		80.00
	Shreveport LA	71104		ction ID: 07c87a8c-4f40-4335-a Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001		11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu	X Oppose	Presider	
	Calendar Year-To-Date Per Election for Office Sought	279986.31	Disbursement 2014 Oth	For: Primary
	Full Name of Payee		Date of	f Public Distribution/Dissemination
	Gregory Green			M / D D / Y Y Y Y Y
1	Mailing Address 2506 Bolch Street		L	11 15 2014
Ì	2000 BOIGH Street		Amoun	t
	City State	Zip Code		52.80
	Shreveport LA	71104	Transac Date of	tion ID: 9f470618-e7a9-4448-9 f Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002		11 / 15 / 2014
ľ	Name of Federal Candidate	Support	Office Sought:	House District:00
	Ms. Mary L Landrieu	X Oppose	Presider	
	Calendar Year-To-Date Per Election for Office Sought	279986.31	Disbursement 2014 Oth	For:
(a	a) SUBTOTAL of Itemized Independent Expenditures		· •	132.80
(k	b) SUBTOTAL of Unitemized Independent Expenditures		·· •	7
(0	C) TOTAL Independent Expenditures		<b>•</b>	7
W	Inder penalty of perjury I certify that the independent expenditures rith, or at the request or suggestion of, any candidate or authorized arty committee) any political party committee or its agent.			
	Ms. Emily Buchanan [Electron	nically Filed] Date	M M / / / / / / / / / / / / / / / / / /	17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature	_		

Schedule E)		<b>76</b> 111 671 6115	1101120		PAGE 20 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITT	,				FEC IDENTIFICATION NUMBER ▼
Women Speal	k Out PAC				C C00530766
Check if 24-hour	report 48-hour report	New rep	ort Amends repo	ort filed on	M / D D / Y Y Y Y Y
Full Name of Pay Lilly Green	ree				of Public Distribution/Dissemination
Mailing Address	205 Medallion Circle			Amou	11 15 2014 nt
City		State	Zip Code		80.00
Shreveport		LA	71119		action ID : 44208a22-e749-4c5d-b of Disbursement or Obligation
Purpose of Exper Salary	nditure		Category/ Type 001		11 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal	Candidate		Support	Office Sough	t: House District:00
Ms. Mary L Landı	rieu		X Oppose	Preside	
Calendar Yea Per Election	ar-To-Date for Office Sought		279986.31	Disbursemen 2014 O	t For:
Full Name of Pay Lilly Green	/ee				of Public Distribution/Dissemination
Mailing Address	205 Medallion Circle			Amou	11 15 2014 nt
City		State	Zip Code		61.80
Shreveport		LA	71119	Transa Date	ction ID : 26f963a0-2cc1-43b3-9 of Disbursement or Obligation
Purpose of Exper Mileage	nditure		Category/ Type 002	N	11 15 / 2014
Name of Federal			Support	Office Sough	t: House District: 00
Ms. Mary L Land	rieu		Oppose	Preside	ent X Senate State: LA
Calendar Ye Per Election	ar-To-Date for Office Sought		279986.31	Disbursemen 2014 O	t For: Primary X General ther (specify) ▶
(a) SUBTOTAL of	Itemized Independent Exper	nditures			141.80
(b) SUBTOTAL of	Unitemized Independent Exp	oenditures		•	7 7 7 7
(c) TOTAL Indepe	ndent Expenditures			· ·	7 1 7 1 7 1
with, or at the requ		indidate or authorized			cooperation, consultation, or concert the reporting entity is not a political
	mily Buchanan	[Electron	cically Filed] Date	e 11	17 2014
Signature					

Schedule E)		TIONES	PAGE 21 OF 30 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report 48-hour report	X New rep	port Amends repo	ort filed on
Full Name of Payee Colton R Overcash			Date of Public Distribution/Dissemination
Mailing Address 121 Ohara Dr			11 / 15 / 2014
ag / taa.655 121 Onara Di			Amount
City	State	Zip Code	95.00
Salisbury	NC	28147	Transaction ID : 0566ee75-220b-4bc9-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	279986.31	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
Colton R Overcash			11 15 2014
Mailing Address 121 Ohara Dr			Amount
City	State	Zip Code	38.70
Salisbury	NC	28147	Transaction ID : 605d4f53-60b1-4b9f-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 15 / Y 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		279986.31	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendi	tures		▶ 133.70
(b) SUBTOTAL of Unitemized Independent Experi	nditures		· •
(c) TOTAL Independent Expenditures			. •
	didate or authorize		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Ms. Emily Buchanan Signature	[Electron	nically Filed] Date	11 17 2014
3.9			

		FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
۷۷	omen Speak Out PAC	C C00530766
Che	eck if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
T	Full Name of Payee  Jessica R Resendiz	Date of Public Distribution/Dissemination
		11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 9685 Paula St	Amount
ŀ	City State Zip Code	50.00
	Keithville LA 71047	Transaction ID: 8539f623-9943-4c84-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary  Category/ Type 001	11 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ī	Name of Federal Candidate Support Office	Sought: House District:00
	Ms. Mary L Landrieu	President State: LA
	Calendar Year-To-Date Per Election for Office Sought  Disbu 279986.31  Disbu 2014	rsement For:
ľ	Full Name of Payee  Jessica R Resendiz	Date of Public Distribution/Dissemination
-	Mailing Address 9685 Paula St	11 15 2014 Amount
ŀ	City State Zip Code	12.90
	Keithville LA 71047	Transaction ID: ff88e2d9-8166-4a9b-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage  Category/ Type  002	11 15 / 2014
ľ	Name of Federal Candidate Support Office	Sought: House District: 00
	Ms. Mary L Landrieu Oppose	President State: LA
	Calendar Year-To-Date Per Election for Office Sought  Disbut 279986.31	rsement For: Primary X General  Other (specify) ▶
(	a) SUBTOTAL of Itemized Independent Expenditures	62.90
(	b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(	c) TOTAL Independent Expenditures	
٧	Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	Ms. Emily Buchanan [Electronically Filed] Date	1 17 2014
	Signature	

PAGE

OF

Women Speak Out PAC  C coopsions to the company of	Octional Ly		FOR SE OF FORM 24/48
C CXSS30766  Check if	NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Full Name of Payee Alice K Salazar  Mailing Address 605 W Houston St  City State Zip Code Marshall TX 75833  Name of Federal Candidate Ms. Mary L Landrieu  Caledar Year-To-Date Per Election for Office Sought  City State Zip Code Transaction ID : 502001-25ect-4084-b Date of Disbursement or Obligation  TX 75833  City State Zip Code Transaction ID : 502001-25ect-4084-b Date of Disbursement or Obligation  Table Sought: House District: 00 President X Senate State: LA  Calendar Year-To-Date Per Election for Office Sought  City State Zip Code Transaction ID : 502001-25ect-4084-b Date of Disbursement or Obligation  Transaction ID : 502001-25ect-4084-b Date of Disbursement or Obligation  Transaction ID : 502001-25ect-4084-b Date of Disbursement For: Disbursement For: Primary X General  Zold Other (specify) ▶  Date of Public Distribution/Dissemination  TX 75833  Date of Public Distribution/Dissemination  TX 75833  Date of Public Distribution/Dissemination  Table Sought: House District: 00  Transaction ID : 2e73d500-4476-4490-b Date of Disbursement For: Primary X General  Zold Other (specify) ▶  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  TX 75833  Disbursement For: Primary X General  Zold Disbursement For: Primary X General  Zold Disbursement For: Primary X General  Disbursement For: Primary X General  Calendar Year-To-Date Per Election for Office Sought  Type 002  Transaction ID : 2e73d500-4476-4490-b Date of Public Distribution/Dissemination  Table Sought: House District: 00  Transaction ID : 2e73d500-4476-4490-b Date of Public Distribution/Dissemination  Table Sought: House District: 00  Transaction ID : 2e73d500-4476-4490-b Date of Public Distribution/Dissemination  Table Sought: House District: 00  Transaction ID : 2e73d500-4476-4490-b Date of Public Distribution/Dissemination  Table Sought: House District: 00  Transaction ID : 2e73d500-4476-4490-b Date of Public Distribution/Dissemination  Table Sought: House District: 00  Table Sought: House District	vvomen Speak Out PAC		C C00530766
Mailing Address 605 W Houston St  City State Zip Code Marshall TX 75633  Name of Federal Candidate Mailing Address 605 W Houston St  Calegory/ Vype 001  Name of Federal Candidate  Per Election for Office Sought  City State Zip Code Per Election for Office Sought  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement or Obligation  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement or Obligation  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement or Obligation  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement or Obligation  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement or Obligation  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement or Obligation  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement For: Primary Science Per Election for Office Sought  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement For: Primary Science  Primary Science  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-4086-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-408-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-408-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-408-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-408-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-408-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-408-b Date of Debursement For: Primary Science  Tansaction ID : 5f02001e-25ed-408-b Date of	Check if 24-hour report 48-hour report	New report Amends report filed	I on Man / Dad / Yayayay
Mailing Address 605 W Houston St  City State Zip Code Transaction ID : 502016-26ed-4084-b Date of Disbursement or Otligation Date of Disbursement or Office Sought: House District: 00 President Year-To-Date Per Dector for Office Sought: Amount  Calendar Year-To-Date President TX 75633  Full Name of Payee Alice K Salazar  Mailing Address 605 W Houston St  City State Zip Code Transaction ID : 502016-26ed-4084-b Date of Disbursement For: Disbursement For: Disbursement For: Disbursement For: Primary General President Senate State: LA Disbursement For: Primary General President Senate State: LA Disbursement For: Disbursem	Full Name of Payee		Date of Public Distribution/Dissemination
City State Zip Code Marshall TX 75633  Purpose of Expenditure Salary  Name of Federal Candidate Ms. Mary L Landrieu  Category/ Type  Marshall State Zip Code Ms. Mary L Landrieu  Category/ Oppose  President Senate State:  Amount  City State Zip Code Marshall TX 75633  Transaction ID : 902001e-28e4-4084-b Date of Disbursoment or Obligation  Til 1 5 5 2014  Disbursoment For: Primary General  Amount  City State Zip Code Marshall TX 75633  Transaction ID : 2794500-a376-4430-b Date of Public Distribution/Dissemination  Til 1 5 2014  Amount  City State Zip Code Type 002  Transaction ID : 2794500-a376-4430-b Date of Disbursoment or Obligation  Til 1 5 2014  Transaction ID : 2794500-a376-4430-b Date of Public Distribution/Dissemination  Til 1 5 2014  Transaction ID : 2794500-a376-4430-b Date of Disbursoment or Obligation  Til 1 5 2014  Transaction ID : 2794500-a376-4430-b Date of Disbursoment or Obligation  Til 1 5 2014  Transaction ID : 2794500-a376-4430-b Date of Disbursoment or Obligation  Til 1 5 2014  Transaction ID : 2794500-a376-4430-b Date of Disbursoment or Obligation  Til 1 5 2014  Transaction ID : 2794500-a376-4430-b Date of Disbursoment or Obligation  Til 1 5 2014  Transaction ID : 2794500-a376-4430-b Date of Disbursoment or Obligation  Til 1 5 5 2014  Transaction ID : 2794500-a376-4430-b Date of Disbursoment For: Primary  General  Transaction ID : 2794500-a376-4430-b Date of Disbursoment For: Primary  Transaction ID : 2794500-a376-4430-b Date of Disbursoment For: Disbursome			
Marshall  Purpose of Expenditure Salary  Name of Federal Candidate  Ms. Mary L Landrieu  Calendar Year-To-Date Purpose of Expenditure  Salary  Full Name of Payee Alice K Salazar  Mailing Address 605 W Houston St  Name of Federal Candidate  Name of Federal Candidate  Marshall  TX 75633  Transaction ID: 5f02091e-26ed-408d-b Date of Disbursement or Obligation  Full Name of Payee Alice K Salazar  Amount  City  State Zip Code Marshall  TX 75633  Purpose of Expenditure Mileage  Category/ Wype  Ouz  Transaction ID: 2e794500-a476-d300-b Date of Public Distribution/Dissemination  Tala T 75633  Transaction ID: 2e794500-a476-d300-b Date of Disbursement or Obligation  Transaction ID: 2e794500-a476-d300-b Date of Disbursement For: 2014  Amount  Calendar Year-To-Date President Senate State: LA  Disbursement For: Primary Calendar Senate Senate Senate Senate Sen	Mailing Address 605 W Houston St		Amount
Marshall  Purpose of Expenditure Salary  Name of Federal Candidate  Ms. Mary L Landrieu  Calendar Year-To-Date Purpose of Expenditure  Salary  Full Name of Payee Alice K Salazar  Mailing Address 605 W Houston St  Name of Federal Candidate  Name of Federal Candidate  Marshall  TX 75633  Transaction ID: 5f02091e-26ed-408d-b Date of Disbursement or Obligation  Full Name of Payee Alice K Salazar  Amount  City  State Zip Code Marshall  TX 75633  Purpose of Expenditure Mileage  Category/ Wype  Ouz  Transaction ID: 2e794500-a476-d300-b Date of Public Distribution/Dissemination  Tala T 75633  Transaction ID: 2e794500-a476-d300-b Date of Disbursement or Obligation  Transaction ID: 2e794500-a476-d300-b Date of Disbursement For: 2014  Amount  Calendar Year-To-Date President Senate State: LA  Disbursement For: Primary Calendar Senate Senate Senate Senate Sen	City Stat	e Zip Code	80.00
Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year Fo-Date Per Election for Office Sought  City Marshall  TX T5633  Purpose of Expenditure Mileage  Calendar Year Fo-Date Purpose of Expenditure Mileage  Calendar Year Fo-Date Purpose of Expenditure Mileage  Calendar Year Fo-Date Per Election for Office Sought  TX T5633  Purpose of Expenditure Mileage  Calendar Year Fo-Date Per Election for Office Sought  TX T5633  Purpose of Expenditure Mileage  Calendar Year Fo-Date Per Election for Office Sought  Tansaction ID: 2e79d500-a476-d490-b Date of Disbursement or Obligation  Tansaction ID: 2e79d500-a476-d490-b Date of Disbursement For:  Disbursement For:  Primary Amount  City Office Sought:  To Office Sought:  Tansaction ID: 2e79d500-a476-d490-b Date of Disbursement For:  Disbursement For:  Primary Amount  City Office Sought:  Tansaction ID: 2e79d500-a476-d490-b Date of Disbursement For:  Disbursement For:  Primary Amount  City Office Sought:  Tansaction ID: 2e79d500-a476-d490-b Date of Disbursement For:  Disbursement For:  Primary Amount  City Office Sought:  Tansaction ID: 2e79d500-a476-d490-b Date of Disbursement For:  Primary Am		·	Transaction ID : 5f02001e-26ed-408d-b
Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee Alice K Salazar  Mailing Address 605 W Houston St  City State Tx 75633  Transaction ID: 22794500-4476-4d90-b Date of Public Distribution/Dissemination  Tx 75633  Transaction ID: 22794500-4476-4d90-b Date of Disbursement or Obligation  Mileage  Calegory/ Type 002  Transaction ID: 22794500-4476-4d90-b Date of Disbursement or Obligation  Mileage  Calegory/ Type 002  Transaction ID: 22794500-4476-4d90-b Date of Disbursement or Obligation  Mileage  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Calendar Year-To-Date Per Election for Calendar Year-To-Date			M M / D D / Y Y Y Y
Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  President  Senate  Disbursement For: Primary  General  2014  Other (specify)  Date of Public Distribution/Dissemination  Mailing Address 605 W Houston St  Amount  City State  City State  City State  Category  Marshall  TX  T5633  Transaction ID: 2e794500-a476-4d90-b Date of Disbursement or Obligation  Purpose of Expenditure Mileage  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanan    President   Senate   State: LA	Name of Federal Candidate	Support Office	e Sought: House District: 00
Per Election for Office Sought  Full Name of Payee Alice K Salazar  Mailing Address 605 W Houston St  City State Zip Code Marshall  TX 75633  Purpose of Expenditure Mileage  Category/ Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Electi	Ms. Mary L Landrieu		
Full Name of Payee Alice K Salazar  Mailing Address 605 W Houston St  City State Zip Code Marshall TX 75633  Purpose of Expenditure Mileage Category/ O02  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Date of Public Distribution/Dissemination  11			
Alice K Salazar  Mailing Address 605 W Houston St  City State Zip Code Transaction ID: 2c79d500-a476-4490-b Date of Disbursement or Obligation  Purpose of Expenditure Mileage Support Type 002 Titl 15 Z014  Name of Federal Candidate Support Office Sought: House District: 00 President Senate State: LA  Calendar Year-To-Date Per Election for Office Sought 279986.31  Calendar Year-To-Date President Senate State: LA Other (specify)   Calendar Year-To-Date Per Election for Office Sought 279986.31  Calendar Year-To-Date President Senate State: LA Other (specify)   Calendar Year-To-Date President	Full Name of Pavee		
Mailing Address 605 W Houston St  City State Zip Code TX 75633  Purpose of Expenditure Mileage    Name of Federal Candidate   Support Ms. Mary L Landrieu   Sopose   President   Senate State: LA			M = M / D = D / Y = Y = Y
Marshall  TX 75633  Transaction ID : 2e79d500-a476-d490-b Date of Disbursement or Obligation  Marshall  Purpose of Expenditure Mileage  Category/ Type  O02  M11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Mailing Address 605 W Houston St		
Purpose of Expenditure Mileage    Date of Disbursement or Obligation   Date of Date or Obligation   Date of Date or Obligation   Date of Date or Obligation   D	City Sta:	te Zip Code	52.20
Purpose of Expenditure Mileage    Category/ Type   002	Marshall T	75633	
Ms. Mary L Landrieu    Calendar Year-To-Date   Per Election for Office Sought   279986.31   Disbursement For:   Primary   General   2014   Other (specify)			M = M / D = D / Y = Y = Y
Ms. Mary L Landrieu    Calendar Year-To-Date   President   Senate   State: LA	Name of Federal Candidate	Support Office	e Sought: House District: 00
(a) SUBTOTAL of Itemized Independent Expenditures	Ms. Mary L Landrieu		-
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanan  [Electronically Filed]  Date  11  17  2014	(a) SUBTOTAL of Itemized Independent Expenditures	• • • • • • • • • • • • • • • • • • •	132.20
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanan  [Electronically Filed]  Date  MMMM  17  2014	(b) SUBTOTAL of Unitemized Independent Expenditures.		
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanan  [Electronically Filed]  Date    Mand	(c) TOTAL Independent Expenditures		
[Electronically Filed] Date 11 17 2014	with, or at the request or suggestion of, any candidate or	authorized committee or agent of eithe	
Dutc	Ms. Emily Buchanan	[Electronically Filed]	
	Signature		

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Sche	edule E)	. EXI END	TOTILO		PAGE 24 OF 30 FOR SE OF FORM 24/48
	OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Wo	men Speak Out PAC				C C00530766
Check	c if $X$ 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	T = M / D = D / Y = Y = Y
	ull Name of Payee Laura U Logie			Date	of Public Distribution/Dissemination
	ailing Address 2565 Shire Circle				11 / 15 / Y Y Y Y Y Y Y
14.	2565 Shire Circle			Amou	ınt
Ci	ity	State	Zip Code		40.00
	Harrisonburg	VA	22801		saction ID: f9f9dcfb-7853-4047-9 of Disbursement or Obligation
	urpose of Expenditure Salary		Category/ Type 001		11 15 2014
Na	ame of Federal Candidate		Support	Office Sough	nt: House District: 00
N	/Is. Mary L Landrieu		Oppose	Preside	
	Calendar Year-To-Date Per Election for Office Sought	, , , , 2	279986.31	Disbursemen 2014	nt For: Primary
	ull Name of Payee			Date	of Public Distribution/Dissemination
1	Carla K Pilgreen				MIM / DID / YIYIYIY
M	lailing Address 212 Stonecliff Dr				11 15 2014
	Z1Z Storiedili Di			Amou	unt
С	ity	State	Zip Code		25.00
	West Monro	LA	71291		action ID: 3fb344bf-c237-4b6b-8 of Disbursement or Obligation
	urpose of Expenditure Salary		Category/ Type 001		11 / 15 / 2014
N	ame of Federal Candidate		Support	Office Sough	nt: House District: 00
M	/ls. Mary L Landrieu		Oppose	Presid	
	Calendar Year-To-Date Per Election for Office Sought	, , ,	279986.31	Disbursemer 2014	nt For:
(a)	SUBTOTAL of Itemized Independent Expenditure	)S		▶	65.00
(b)	SUBTOTAL of Uniternized Independent Expendit	ures		· •	1 7 1 1 7 1 1 7 1
(c)	TOTAL Independent Expenditures			•	
with	der penalty of perjury I certify that the independe h, or at the request or suggestion of, any candida ty committee) any political party committee or its	ate or authorized			
	Ms. Emily Buchanan	[Electron	ically Filed] Date	M M /	17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature		_		

· · · · ,		FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
Women Speak Out PAC		C C00530766			
Check if 24-hour report 48-hour report	New report Amends report filed on	M = M / D = D / Y = Y = Y			
Full Name of Payee	Da	ate of Public Distribution/Dissemination			
Carla K Pilgreen		11 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 212 Stonecliff Dr	Ar	mount			
City	ate Zip Code	6.00			
West Monro L		ransaction ID: 1240515a-234b-4374-a ate of Disbursement or Obligation			
Purpose of Expenditure Mileage	Category/ Type 002	11 15 2014			
Name of Federal Candidate	Support Office Sc	ought: House District: 00			
Ms. Mary L Landrieu	Oppose Pre	esident State: LA			
Calendar Year-To-Date Per Election for Office Sought	279986.31 Disburser 2014	ment For:			
Full Name of Payee Michael Vidrine  Mailing Address 1103 West Wilson Street		ate of Public Distribution/Dissemination			
	A	mount			
City Sta		50.00			
		ansaction ID : 3b581b4f-d91c-419b-8 ate of Disbursement or Obligation			
Purpose of Expenditure Salary	Category/ Type 001	11 / 15 / 2014			
Name of Federal Candidate	Support Office So	ought: House District: 00			
Ms. Mary L Landrieu	Oppose Pre	esident State: LA State:			
Calendar Year-To-Date Per Election for Office Sought	279986.31 Disburse 2014	ment For:			
(a) SUBTOTAL of Itemized Independent Expenditures	•	56.00			
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	·····				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Ms. Emily Buchanan	[Electronically Filed] Date 11	17 2014			
Signature					

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OF

						FOR SE OF	FORM 24/48
NAME OF COMMIT					FEC II	DENTIFICATIO	N NUMBER ▼
Women Spea	K Out PAC				С	C00530766	
Check if X 24-hou	r report 48-hour r	eport New repo	ort Amends	report filed or	n	/ D = D /	Y = Y = Y
Full Name of Pa				[	Date of Publi	ic Distribution/[	Dissemination
Michael Vi					M = M	15	2014
Mailing Address	1103 West Wilson Stree	t		,	Amount		
City		State	Zip Code				32.70
Ville Platte		LA	70586			ID: ad8b6d75 ursement or O	
Purpose of Expe Mileage	nditure		Category/ Type	002	11	15	2014
Name of Federa	Candidate		Supp	ort Office S	Sought:	House [	District: 00
Ms. Mary L Land	Irieu		Х Орро			Senate	State: LA
Calendar Ye Per Election	ear-To-Date of for Office Sought	2	79986.31	Disburs 2014	ement For: Other (sp	Primary pecify) ▶	X General
Full Name of Pa		<u> </u>		_	Date of Publi	ic Distribution/l	
Mailing Address					11	15	2014
Walling Address	6101 NORA ST				Amount		
City		State	Zip Code				70.00
METAIRIE		LA	70003			<b>D</b> : <b>392a776e-0</b> ursement or O	
Purpose of Expe Salary	enditure		Category/ Type	001	11	15	2014
Name of Federa	I Candidate		Supp	ort Office S	Sought:	House I	District: 00
Ms. Mary L Land	Irieu		X Oppo	ose F	President	Senate	State: LA
Calendar You Per Election	ear-To-Date n for Office Sought		279986.31	Disburs 2014	ement For: Other (s	Primary pecify) ▶	X General
(a) SUBTOTAL o	f Itemized Independent E	Expenditures		······ •		7	102.70
(b) SUBTOTAL of	f Unitemized Independer	nt Expenditures		····· [			
(c) TOTAL Indep	endent Expenditures			······ [	7	7	
with, or at the red		independent expenditures ny candidate or authorized ittee or its agent.					
Ms. A	Emily Buchanan	[Electroni	cally Filed]	Date 11	/ 0 0	/ Y Y Y 2014	Y
Signature			- 				

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	include Ly	FOR SE OF FORM 24/48			
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
V	Vomen Speak Out PAC	C C00530766			
Ch	eck if X 24-hour report 48-hour report New report Amends report filed	i on Mam / Dab / Yayayay			
	Full Name of Payee	Date of Public Distribution/Dissemination			
	ERIC TABÁRY	11 15 2014			
	Mailing Address 6101 NORA ST	Amount			
	City State Zip Code	1.80			
	METAIRIE LA 70003	Transaction ID : 250d5d7e-94ed-489d-9 Date of Disbursement or Obligation			
	Purpose of Expenditure Mileage  Category/ Type  002	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Name of Federal Candidate Support Offic	e Sought: House District: 00			
	Ms. Mary L Landrieu Oppose	President State: LA			
	Calendar Year-To-Date Per Election for Office Sought  Disb 279986.31  Disb 2014				
		U Other (specify) ►			
	Full Name of Payee  Carl Brent	Date of Public Distribution/Dissemination			
	Mailing Address 6718 Lake Willow Dr	11 15 2014 Amount			
	City State Zip Code	80.00			
	New Orleans LA 70126	Transaction ID : 10411318-8324-4175-b Date of Disbursement or Obligation			
	Purpose of Expenditure Salary  Category/ Type  001	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Name of Federal Candidate Support Offic	e Sought: House District: 00			
	Ms. Mary L Landrieu Oppose	President Senate State: LA			
	Calendar Year-To-Date Per Election for Office Sought  Disb 2014	ursement For:  Primary			
	(a) SUBTOTAL of Itemized Independent Expenditures	81.80			
	(b) SUBTOTAL of Unitemized Independent Expenditures				
	(c) TOTAL Independent Expenditures				
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
		11 17 2014			
	Signature				

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OF

Per Election for Office Sought  Full Name of Payee Theresa a Youngblood  Mailing Address 102 S Main Street Apt A2  City State Zip Code Berryville  Purpose of Expenditure Salary  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures are reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanan  [Electronically Filed]  Date  Other (specify)   Date of Public Distribution/Dissemination  111  111  15  2014  Amount  Transaction ID: 43413e91-5aab-4940-8  Transaction ID: 43415e91-5aab-4940-8  Transaction ID: 43415e91-5aab-4940-8  Transact		neddie E)			FOR SE OF	FORM 24/48
Check if X 24-hour report				FEC	IDENTIFICATION	ON NUMBER ▼
Full Name of Payee Carl Brent  Name of Payee Carl State	۷۱	romen Speak Out PAC		С	C00530766	
Carl Brent  Mailing Address 6718 Lake Willow Dr  City State Zip Code New Orleans LA 70126  Purpose of Expenditure Mileage Category/ Type 002  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Theresa a Youngblood  Mailing Address 102 S Main Street Apt A2  City State Zip Code Theresa a Youngblood  Mailing Address 102 S Main Street Apt A2  City State Zip Code Berryville VA 22611  Purpose of Expenditure Salary  Name of Federal Candidate  Name of Federal Candidate  Name of Federal Candidate  VA 22611  Purpose of Expenditure Salary  Category/ Type 001  Transaction ID : 44413e91-5aab-4940-8 Date of Public Distribution/Dissemination  Transaction ID : 44413e91-5aab-4940-8 Date of Public Distributi	Ch	eck if X 24-hour report 48-hour report New report Amends report filed	on M	- M	/ D = D /	Y Y Y Y
Mailing Address 6718 Lake Willow Dr  City State Zip Code Purpose of Expenditure Mileage Support Mileage Suppo	٦		Date o	of Pub	lic Distribution	Dissemination
City State Zip Code 111.10 New Orleans LA 70126 Purpose of Expenditure Mileage Category Type 002  Name of Federal Candidate Support Office Sought House District: 00 Ms. Mary L Landrieu Oppose President Senate State: LA  Calendar Year-To-Date Per Election for Office Sought 279986.31  Full Name of Payee Theresa a Youngblood  Mailing Address 102 S Main Street Apt A2  City State Zip Code Berryville VA 22611  Name of Federal Candidate  Name of Federal Candidate  Why State Zip Code Berryville VA 22611  Name of Federal Candidate  Name of Federal Candidate  Why State Zip Code Berryville VA 22611  Name of Federal Candidate  Name of Federal Candidate  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu Support Office Sought House District: 00  Ms. Mary L Landrieu House Distriction D: 44413e91-5aab-4940-8  Transaction ID: 44416-10  Transaction ID: 44413e91-5aab-4940-8  Transaction ID: 44413e91-						
New Orleans  LA 70126  Purpose of Expenditure Mileage  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Purpose of Expenditure Calendar Year-To-Date Per Election for Office Sought  Purpose of Expenditure Salary  Name of Federal Candidate  Naming Address  102 S Main Street Apt A2  City State Purpose of Expenditure Salary  Name of Federal Candidate  Name of Federal Candidate  Name of Federal Candidate  Name of Federal Candidate  Purpose of Expenditure Salary  Name of Federal Candidate  Name of Federal Candidate  Name of Federal Candidate  Name of Federal Candidate  Support  Category  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or		Mailing Address 6718 Lake Willow Dr	Amour	nt		
New Orleans  LA 70126  Purpose of Expenditure Mileage  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Purpose of Expenditure Calendar Year-To-Date Per Election for Office Sought  Purpose of Expenditure Salary  Name of Federal Candidate  Naming Address  102 S Main Street Apt A2  City State Purpose of Expenditure Salary  Name of Federal Candidate  Name of Federal Candidate  Name of Federal Candidate  Name of Federal Candidate  Purpose of Expenditure Salary  Name of Federal Candidate  Name of Federal Candidate  Name of Federal Candidate  Name of Federal Candidate  Support  Category  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Onl  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or		City State Zip Code	Г.	-		11.10
Purpose of Expenditure Mileage  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Purpose of Expenditure Salary  Name of Federal Candidate  Name of Federal Candidate  Calendar Year-To-Date Purpose of Expenditure Salary  Name of Payee Theresa a Youngblood  Mailing Address 102 S Main Street Apt A2  City State VA 22611  Purpose of Expenditure Salary  Name of Federal Candidate  Name of Federal Candidate  Name of Federal Candidate  Purpose of Expenditure Salary  Name of Federal Candidate  Name of Federal Candidate  Support Office Sought:  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office Sought:  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Office						
Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Per Election for Office Sought  Full Name of Payee Theresa a Youngblood  Mailing Address 102 S Main Street Apt A2  City State Zip Code Berryville  VA 22611  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Disbursement For: Primary General Primary General  Oppose  Disbursement For: Primary General  Oppose  Disbursement For: Primary General  Oppose  Disbursement For: Primary General  Other (specify) ▶  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanam  [Electronically Filed]  Date 11 17 2014		Mileage Category/ 002		- M	/ D D /	Y Y Y Y
Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought President  Calendar Year-To-Date Per Election for Office Sought President  Calendar Year-To-Date Per Election for Office Sought President  Cother (specify)  Date of Public Distribution/Dissemination  Mailing Address  102 S Main Street Apt A2  City State VA 22611  Purpose of Expenditure Salary  Category/ Type  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emity Buchanam  [Electronically Filed]  Date  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement For: 2014  Disbursement For: Primary General Disbursement For: Primary Ge		Name of Federal Candidate Support Office	Sought	t:	House	District: 00
Per Election for Office Sought  Full Name of Payee Theresa a Youngblood  Mailing Address 102 S Main Street Apt A2  City State Zip Code Berryville VA 22611  Purpose of Expenditure Salary  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanan  [Electronically Filed]  Date  Other (specify)   Date of Public Distribution/Dissemination  111  111  15  2014  Amount  Transaction ID: 43413e91-5aab-4940-8  Transaction ID: 43413e91-5aab-4940-8  Transaction ID: 43413e91-5aab-4940-8  Transaction ID: 43413e91-5aab-4940-9  Tra		Ma Marriel Landrice	_			
Full Name of Payee Theresa a Youngblood  Mailing Address 102 S Main Street Apt A2  City State Zip Code Berryville VA 22611  Purpose of Expenditure Salary  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures		Odicitadi Tedi To Bate				X General
Mailing Address 102 S Main Street Apt A2  City State Zip Code Berryville VA 22611  Purpose of Expenditure Salary  Category/ 001  Name of Federal Candidate Support Office Sought Senate State: LA  Calendar Year-To-Date Per Election for Office Sought 279986.31  Calendar Year-To-Date Per Election for Office Sought 279986.31  Calendar Year-To-Date Office Sought 279986.31  Calendar Year-To-Date Per Election for Office Sought 279986.31  Calendar Ye			Date of	of Pub	olic Distribution	Y Y Y Y Y
Berryville VA 22611  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Purpose of Expenditure Salary  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Military 15  Zo114  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Disbursement For: Primary General 2014  Other (specify)  (c) TOTAL Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanan  [Electronically Filed] Date  Transaction ID: 4a413e91-5aab-4940-8 Date of Disbursement or Obligation  Tit / 15  Zo14  Zo14  Zo14  Disbursement For: Primary General 2014  Other (specify)  91.10		Mailing Address 102 S Main Street Apt A2	Amou		لتت ا	
Purpose of Expenditure Salary  Name of Federal Candidate Ms. Mary L Landrieu  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditures  (c) TOTAL Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Date of Disbursement or Obligation  M11		City State Zip Code			n 1 4	80.00
Salary Calegory Office Sought: House District: 00   Ms. Mary L Landrieu X Oppose President X Senate State: LA   Calendar Year-To-Date Per Election for Office Sought 279986.31 Disbursement For: Primary General 2014   (a) SUBTOTAL of Itemized Independent Expenditures 91.10    (b) SUBTOTAL of Unitemized Independent Expenditures  (c) TOTAL Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanan  [Electronically Filed]  Date  11  17  2014						
Ms. Mary L Landrieu    Calendar Year-To-Date   President   Senate   State: LA		Salary Odlegory 001				
Ms. Mary L Landrieu    Calendar Year-To-Date   Per Election for Office Sought   279986.31   Disbursement For:   Primary   General 2014   Other (specify) ▶    (a) SUBTOTAL of Itemized Independent Expenditures		Name of Federal Candidate Support Office	e Sough	t:	House	District: 00
Per Election for Office Sought  279986.31  Other (specify)  (a) SUBTOTAL of Itemized Independent Expenditures			_		Senate	
(b) SUBTOTAL of Unitemized Independent Expenditures		2011				General
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanan  [Electronically Filed]  Date  11  17  2014		(a) SUBTOTAL of Itemized Independent Expenditures		-7	7	91.10
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  **Ms. Emily Buchanan**  [Electronically Filed]  Date  11  17  2014		(b) SUBTOTAL of Unitemized Independent Expenditures	Ľ.			
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Ms. Emily Buchanan  [Electronically Filed]  Date  Date		(c) TOTAL Independent Expenditures			7	
[Electronically Filed] Date 11 17 2014	١	with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political				
- Date		[F1 - +	M /			
Orgination — — — — — — — — — — — — — — — — — — —		Signature				

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Schedule E)	II EXI END	ITOTILO		PAGE 29 OF 30 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)			FEC IDI	ENTIFICATION NUMBER ▼			
Women Speak Out PAC			C	C00530766			
Check if 24-hour report 48-hour report New report Amends report filed on							
Full Name of Payee			Date of Public	Distribution/Dissemination			
Julia Perry			M M /	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 2046 Perrin St Apt C			Amount				
City	State	Zip Code		100.00			
Shreveport	LA	71101		D: 1293645c-3ca6-4e8e-9 rement or Obligation			
Purpose of Expenditure Salary		Category/ Type 001	11	15 / 2014			
Name of Federal Candidate		Support	Office Sought:	House District: 00			
Ms. Mary L Landrieu		X Oppose	President X	<u></u>			
Calendar Year-To-Date Per Election for Office Sought	, , , ,	279986.31	Disbursement For: 2014 Other (spe	Primary			
Full Name of Payee	_		Date of Public	Distribution/Dissemination			
Julia Perry			11 /	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 2046 Perrin St Apt C			Amount				
City	State	Zip Code		10.50			
Shreveport	LA	71101		: f32fa16e-cd23-49b5-b rsement or Obligation			
Purpose of Expenditure Mileage		Category/ Type 002	11 /	15 / 2014			
Name of Federal Candidate		Support	Office Sought:	House District: 00			
Ms. Mary L Landrieu		X Oppose	President >	Senate State: LA			
Calendar Year-To-Date Per Election for Office Sought	7 7	279986.31	Disbursement For: 2014 Other (spe	Primary X General			
(a) SUBTOTAL of Itemized Independent Expenditure	es			110.50			
			7				
(b) SUBTOTAL of Unitemized Independent Expend	itures		<b>•</b>	4			
(c) TOTAL Independent Expenditures			<b>•</b>	7			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
Ms. Emily Buchanan Signature	[Electron	ically Filed] Date	11 / 17	2014			

				FOR SE OF FORM 24/48		
	OF COMMITTEE (In Full)		FEC	DIDENTIFICATION NUMBER ▼		
vvon	nen Speak Out PAC		С	C00530766		
Check	if X 24-hour report 48-hour report New report	ort Amends report	filed on	/ D = D / Y = Y = Y		
	Name of Payee		Date of Pu	ublic Distribution/Dissemination		
	ynthia J Christmas		M - M	/ D D / Y Y Y Y Y Y Y 15 2014		
Ма	iling Address 1731 Frenchmen St		Amount			
Cit	y State	Zip Code		60.00		
	ew Orleans LA	70116		on ID: d3f1921c-9676-4635-9 isbursement or Obligation		
	rpose of Expenditure alary	Category/ Type 001	11			
Na	me of Federal Candidate	Support	Office Sought:	House District:00		
Ms	s. Mary L Landrieu	X Oppose	President	Senate State: LA		
	Calendar Year-To-Date Per Election for Office Sought 2		Disbursement For	r: Primary		
Ful	I Name of Payee			ublic Distribution/Dissemination		
	ynthia J Christmas		M M M			
Ma	iling Address 1731 Frenchmen St		Amount	15 2514		
Cit	y State	Zip Code		7.50		
	ew Orleans LA	70116		n ID : c015a19b-2748-4be9-9 isbursement or Obligation		
	rpose of Expenditure ileage	Category/ Type 002	Date of B			
Na	me of Federal Candidate	Support	Office Sought:	House District:00		
Ms	s. Mary L Landrieu	X Oppose	President	Senate State: LA		
	Calendar Year-To-Date Per Election for Office Sought	279986.31	Disbursement Fo 2014 Other	r: Primary X General (specify) ▶		
(a)	SUBTOTAL of Itemized Independent Expenditures		·	67.50		
(b)	SUBTOTAL of Unitemized Independent Expenditures		<b>.</b>	7 1 7 1 5 1		
(c)	TOTAL Independent Expenditures		•	2319.99		
with,	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	Ms. Emily Buchanan [Electroni	cally Filed] Date	M M / D 1	7 2014		
5	Signature					

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